



**CYFARFOD BWRDD PRIFYSGOL IECHYD
UNIVERSITY HEALTH BOARD MEETING**

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| DYDDIAD Y CYFARFOD: DATE OF MEETING: | 28 January 2021 |
| TEITL YR ADRODDIAD: TITLE OF REPORT: | Improving Patient Experience |
| CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR: | Mandy Rayani, Director of Nursing, Quality & Patient Experience |
| SWYDDOG ADRODD: REPORTING OFFICER: | Louise O'Connor, Assistant Director, Legal Services / Patient Experience |

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA
SBAR REPORT**

Sefyllfa / Situation

The attached report provides a summary of patient experience feedback and activity for the period ending 31st December 2020.

Cefndir / Background

The Board is asked to note the progress made in supporting the improvement of family and service user experience, and the current position in relation to feedback, including complaints.

The Board is also asked to note the introduction of the Public Services Ombudsman for Wales Complaints Standards Authority and the guidance issued to all public bodies on implementing the new complaints handling standards.

Asesiad / Assessment

Patient and service user feedback is received into the UHB through a variety of routes: Friend and Family Test; compliments (formal letters received by the Chief Executive, Chair and the Big Thank You initiative); concerns and complaints, Patient Advice and Liaison Service (PALS) feedback; local surveys; the all Wales NHS survey and via social media.

The main areas of activity and progress for the Patient Experience Team are summarised in the report.

The Board is asked to note that, due to the short time period since receiving the patient experience feedback and the production of this report, comments have been sought from the services involved, and responses will be included in the next Board report.

For the period 1st November to 20th December 2020 (production of the report), a total of 499 (666 previous period) concerns were received into the patient support contact centre; 248 were complaints managed through the 'Putting Things Right' process. This represents a decrease in the number of concerns and complaints received from the previous period.

Public Services Ombudsman – Five cases have progressed to investigation during the period. Four final reports have been received, which were upheld/partly upheld. These cases will be presented to the next meeting of the Listening and Learning Sub-Committee.

No concerns have been raised in relation to compliance with timescales and agreed actions at this time.

The predominant themes received from complaints and patient experience feedback continue to be around waiting times, restarting services, COVID-19 related enquiries, and clinical treatment/assessment, including delays in diagnosis.

Communication with patients waiting for treatment is a priority for the UHB, and is being addressed as a matter of urgency.

Argymhelliad / Recommendation

The Board is asked to receive the Improving Patient Experience report, which highlights to patients and to the public the main themes arising from patient feedback.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

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| Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score: | Risk 581 Health Board wide risk of not learning from events in a timely manner (current score 8). |
| Safon(au) Gofal ac Iechyd: Health and Care Standard(s): Hyperlink to NHS Wales Health & Care Standards | 6.3 Listening and Learning from Feedback |
| Amcanion Strategol y BIP: UHB Strategic Objectives: Hyperlink to HDdUHB Strategic Objectives | 4. Improve the productivity and quality of our services using the principles of prudent health care and the opportunities to innovate and work with partners. 5. Deliver, as a minimum requirement, outcome and delivery framework work targets and specifically eliminate the need for unnecessary travel & waiting times, as well as return the organisation to a sound financial footing over the lifetime of this plan |
| Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019 | 8. Transform our communities through collaboration with people, communities and partners |

Gwybodaeth Ychwanegol:

Further Information:

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| Ar sail tystiolaeth: Evidence Base: | NHS (Concerns, Complaints and Redress Arrangements) (Wales) 2011 |
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| Rhestr Termau: Glossary of Terms: | Included within the main body of the report |
| Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Cyfarfod Bwrdd Iechyd Prifysgol: Parties / Committees consulted prior to University Health Board: | Not applicable |

| Effaith: (rhaid cwblhau) Impact: (must be completed) | |
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| Ariannol / Gwerth am Arian: Financial / Service: | All concerns have a potential financial implication: whether this is by way of financial redress, following an admission of qualifying liability, or an ex-gratia payment for poor management of a process; or an award made by the Ombudsman following review of a concern. |
| Ansawdd / Gofal Claf: Quality / Patient Care: | Improving the patient experience and outcomes for patients is a key priority for the UHB. All concerns received from patients, public and staff alike are taken seriously and investigated in accordance with the procedures. Information from concerns raised, highlights a number of clinical and service risks which should be reflected in Directorate Risk Registers. All Directorates are required to have in place arrangements for ensuring lessons are learnt as a result of investigation findings regarding concerns and that appropriate action is taken to improve patient care. |
| Gweithlu: Workforce: | The 'Putting Things Right' process is designed to support staff involved in concerns and incidents. All managerial staff have a responsibility to ensure staff are appropriately supported and receive appropriate advice throughout the process. The success of the process is dependent upon the commitment and support from staff across the organisation, not only as part of the investigation process and transparency arrangements, but in the encouragement of patients and their families to provide feedback, both positive and negative, to support organisational learning. |
| Risg: Risk: | Information from concerns raised highlights a number of clinical and service risks which should be reflected in Directorate and Corporate Risk Registers. There are financial and reputational risks associated with complaints that are upheld or not managed in accordance with the Regulations. The UHB also has a duty to consider redress as part of the management of concerns, which carries financial risks associated with obtaining expert reports and redress packages. |
| Cyfreithiol: Legal: | The UHB has a duty under the Concerns and Redress Regulations to consider redress where this is deemed to be a qualifying liability. The Regulations also incorporate formal claims, including clinical negligence and personal injury claims. |

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| Enw Da: Reputational: | <p>There are ongoing reputational risks for the UHB in relation to media, press and social media regarding any concerns, and outcomes from published Ombudsman Reports and any external investigations/inquiries.</p> |
| Gyfrinachedd: Privacy: | <p>Only relevant information is reviewed as part of the concerns process and this is carried out with the explicit consent of the patient or authorised representative. Information is recorded and treated sensitively and only shared with individuals relevant to the investigation process.</p> |
| Cydraddoldeb: Equality: | <p>The process is established to learn from concerns: it is designed to ensure that it is fully accessible to patients and their families. The aim is to involve patients throughout the process and to offer meetings with relevant clinicians, with the required support depending upon individual needs.</p> <p>Advocacy is offered in the form of Community Health Council (CHC) advocates, and specialist advocacy is also arranged where necessary, e.g. in the areas of Mental Health, Learning Disability or Children/Young People's Services.</p> <p>Concerns literature is accessible in a range of languages and formats and translation services are available, as required.</p> |